# **Application Data Sheet**

### **Application Information**

Application Type:: Regular Subject Matter:: Utility

Suggested Group Art Unit:: 3744

Title: REFRIGERATOR HAVING POWER OUTAGE

**DURATION FEATURE** 

Attorney Docket Number:: P05522US02

Request for Early Publication:: No

Request for Non-Publication:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 2

Small Entity?:: No

# **Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Nelson

Middle Name:: J.

Family Name:: Ferragut

Name Suffix::

City of Residence:: Williamsburg

State or Province of Residence:: IA

Country of Residence:: US

Street of mailing address:: 107 Leo Blvd.
City of mailing address:: Williamsburg

State or Province of mailing address:: IA

Country of mailing address:: US

Postal or Zip Code of mailing address:: 52361

Applicant Authority Type:: Inventor

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Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: John

Middle Name:: L.

Family Name:: McNamara

City of Residence:: Coralville

State or Province of Residence:: IA

Country of Residence:: US

Street of mailing address:: 775 Forest Edge Drive

City of mailing address:: Coralville

State or Province of mailing address:: IA

Country of mailing address:: US

Postal or Zip Code of mailing address:: 52241

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Louis

Family Name:: Montuoro

City of Residence:: Cedar Rapids

State or Province of Residence:: IA

Country of Residence:: US

Street of mailing address:: 7105 Pleasant Ridge Dr. S.W.

City of mailing address:: Cedar Rapids

State or Province of mailing address:: IA

Country of mailing address:: US

Postal or Zip Code of mailing address:: 52404

### **Correspondence Information**

Correspondence Customer Number::

27139

Name::

McKee, Voorhees & Sease, P.L.C.

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City of mailing address:

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State or Province of mailing address:

IA

Country of mailing address::

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Postal Zip Code or mailing address::

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#### Representative Information

Representative Customer Number::	22885	

# **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation	10/195,787	July 15, 2002
10/195,787	Nonprovisional App	60/305,766	July 16, 2001

#### **Assignment Information**

Assignee name::

**Maytag Corporation** 

Street of mailing address::

403 West Fourth Street North

City of mailing address::

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State or Province of mailing address::

IA

Country of mailing address::

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